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Boulder River School & Hospital
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Mackay's Proposals on Community Programs for the Mentally Retarded

by
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Title I Project

The following article is a proposal written by BMT II Jan Mackay at the request of Mike Billings, Director of the Governor's Office of Budget and Program Planning. The proposal concerns the role of the State in providing Community Services and the future of existing institutions.

On September 13, 1974, a meeting was held in Helena to discuss Community Programs for the Mentally Retarded. The second half of the meeting involved breaking into small group sessions for the purpose of discussing placement plans to bring the mentally retarded into the community.

The general trend of thought revealed in the group meeting I attended was not to place the retarded in institutions of any kind, but rather to place them in very small centers or group homes. I agree with this line of thought because it will facilitate the goal and principle of normalization: the mentally retarded can best be habilitated in an environment as close to that of the community as possible.

At the meeting, I recommended that there be two ways for the mentally retarded to adapt to the community. First, there are approximately eighty residents at Boulder River School and Hospital who currently exhibit too many maladaptive behaviors to be successful in a group home placement without further training. For these residents, I recommend the construction of eight special treatment centers to temporarily house these citizens until they can be placed elsewhere. These centers could then be used to provide other services related to the mentally retarded in the community, which I will elaborate on later.

Secondly, the other 280 residents could go into modified group homes.

The institution located at Boulder does not provide a "normal" environment, and it has no access to community services. It does not provide an environment which facilitates adaptive behavior, and the environment it does provide is not only dehumanizing, but hinders the maintenance of learned skills and the acquisition of appropriate social behaviors.

Part I Special Treatment Centers

According to the social workers' projected living plans for each resident of BRS&H, there are no more than eighty residents who have been recommended for placement in a "special treatment center." By far, most projected living plans recommend group home placement.

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My plan involves the construction of eight ten-bed facilities located in the following cities: two centers in Missoula, two centers in Billings, two centers in Bozeman, one center in Great Falls, and one in Helena.

The residents of these facilities would be those who exhibit too many maladaptive behaviors to be successful in a group home placement without further advanced training. An effort should be made to group these residents homogeneously by skill level and age. The centers would provide professional, intensive training to the residents until they can be placed elsewhere. The centers could also provide other services such as: 1) a training facility for interested university students; 2) a place through which community services can be contracted (such as physical therapy, occupational therapy, special education, vocational rehabilitation, psychological evaluation, and recreational activities); and 3) an education program for communities and families.

As the residents of these special treatment centers are placed in other facilities, these centers could provide training, day care, and respite care to the mentally retarded of their community. In order to meet these objectives, the centers should be staffed somewhat like this:

1 Supervisor
1 Social Worker
1 Secretary
3 Behavior Modification Professionals:

- 1 Community Coordinator
- 2 Trainers

1 Nurse
1 Dietician
3 Housekeepers

Each building should be designed with the goal of constructing a rewarding, stimulating, adaptive environment. Plans for the proper design should be acquired by consulting with a behavioral psychologist with expertise in this field. I feel the State should provide all funds necessary to build and staff these centers.

Part II Modified Group Homes

For the 200 other residents to be placed out of BRS&H, I would like to see placement in modified group homes. I would like approximately thirty such homes designed and put to use. Further, the State should provide money to counties for the renovation (if necessary), design, and staffing of these homes.

Again, an attempt should be made to group the residents homogeneously. Each home should have between four and eight residents (depending on the severity of residents' physical handicaps). The homes should be staffed with a rotating staff of houseparents (possibly on different shifts) to ease the work load and responsibility of the houseparents. An effort should be made to hire people with knowledge or experience in behavior modification. I would also recommend that two full-time professional behavior modification technicians be hired to supervise and train the houseparents to implement programs with the residents. Each group home should have access to all county services, as well as all community services.

Part III Natural Homes

I would recommend that the State pay families and/or foster families enough money to provide incentives to keep a mentally retarded citizen in their home. I would suggest $200.00 to $250.00 a month, and free access to services from any one of the special treatment centers to learn the techniques of behavior modification and for help in implementing home programs. Also, each family should have access to day care and respite care, as these services become available.

Part IV Existing Institution

The last portion of this proposal regards the role that the existing institutions should play in the future. To begin with, I feel very strongly that retaining a resident population at BRS&H is in direct conflict with the principle of normalization. Therefore, I feel that the institution's future role should be only to provide:

1) diagnostic and evaluation services

2) a central data system base to provide feedback to each center or group home

I also feel the State should form a Human Rights Committee and appoint advocates for the protection of the rights of the mentally retarded.

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